APPLICATION FOR ZONING / ORDINANCE VARIANCE City of Canton, Texas

INSTRUCTION: Please fill out completely. If more space is needed, use extra sheet. Include a plat of the property.

APPLICANT:	Phone:
Mailing Address:	
AGENT / ATTORNEY:	Phone:
Mailing Addross	
ZONING / ORDINANCE VARIANC	E REQUESTED:
Front Setback: From:	To:
Back Setback: From:	To:
Side Setback: From:	To:
Other:	
PROPERTY DESCRIPTION: (Physica	al address, Lot, Block, Name of Subdivision/Addition)
PRESENT USE OF LAND: (If vacant	land, so state)
PROPOSED DEVELOPMENT AND REASONS FOR VARIANCE / ORDINANCE REQUEST:	
STATUS OF APPLICANT: (If other t	than owner, attach written authority from owner)
Owner:	
Trustee:	List names of individuals for whom property is held in trust.)
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Corporation:	(List name and title of officers and board of directors)
Other:	
If application is made by someone	other than the above, please indicate relationship between applicant
and owner, if any, or the capacity in which the applicant is submitting the application (e.g., prospective	
purchaser, tenant, relative, etc.)	
FILING FEE: \$150.00 (Make check payable to the City of Canton)	
Mail or bring application to the City Hall, 201 N. Buffalo, Canton, TX 75103. Please include a plat of the	
property.	y Han, 201 N. Bullalo, Canton, 17 /3103. Flease include a plat of the
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Date:	Signature of Applicant: